UTAH DEPARTMENT OF TRANSPORTATION

Application for Special Event Permit

(Events cannot occupy the Right of Way until a p	permit is approved)			
Date of Application:				
Name of Event: Type of Event:				
Organization Name:	C	Contact Person:		
Address:	City:		State:	
Description of Event:				
Date(s): Beginning//	Time: Beginn	ning: AM	PM	
Ending//	Ending	g:AM	PM	
NOTE: If time will vary on subsequent days, at	ach explanation.			
Location Proposed Route(s):				
City: County	. Describe	the necessity of having the	event on a highway	
Number of participants [] Number of anima				
Description of vehicle or material used:				
Description of activity on the highway:				
If this permit is granted, we agree to comply we manual for the Accommodation of Utilities and Limitations" required by the Region Director/Dis	the Control and Protec	tion of State Highway Righ	nts of Way and "Special	
I certify that all participants of this event have si which are made a part of this permit.	gned a waiver, that the	ey are aware of all the rules	they must abide by and	
Company name	Sign	nature	Date	
Region/District Traffic Engineer	Date Regio	on Director/District Engineer	r Date	

Note: This permit is approved for use of State routes only. All other routes must be cleared by the jurisdiction (city/county) they are within. This application constitutes a request for agency action under Utah Code Annotated $\delta 63$ -46b-3